									Number		Filir	ng Date			
CLAIMS ONLY								Application Number Filing Date							
								Applicant	s) ,	, , , , , , , , , , , , , , , , , , , 			-		
								May be used for additional claims or amendments							
CLAIMS	3-5	AS FILED AFTER FIRST AFTER SECOND AMENDMENT AMENDMENT					•		•		*				
	Indep	Depend	Indep	Depend	Indep				Indep	Depend	Indep	Depend	Indep	Depend	
1 2	 	/-		 				51 52	$\overline{\mathcal{A}}$	 	} _			ļ	
3								53		_/	<u> </u>	<u>† </u>		 	
5	 	/			<u> </u>			54 55				ļ			
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7 8		V						57 58							
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14 15	K	 		-				64 65	 \	/		 	 		
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Total	4	1	-	1				Total	1	1					
Indep Total								Indep Total				<u> </u>			
Depend								Depend	; 4						
Total Claims								Total Claims	2					1	